





# General Questions: (To be completed by ALL applicants)

Name of Proposer										
Please give details/members of any Shooting Organisation which you belong e.g. BASC										
Contact Name: Mr/Mrs/Ms										
Contact Address										
Postcode							Tel No.			
Full Description of activities										
Please give location address(s of where events will take place										
							Postc	ode		
Cover Required From										
Are you currently or have you previously been insured for th		Yes		No		Name of Ir	nsurer			
Policy Number		Expiry Date								
								Ye	es	No
Do you have a Health & Safety risk assessment in place?										
Have you had proposal declined, policy cancelled, renewal refused or been requ to pay an increased premium?					been require	ed				
Have you been convicted of a criminal offence (Other than a motoring offence) not treated as spent under the rehabilitation of offenders act 1974?										
Have you been, subject to a receiving order, subject of a court judgement for an outstanding debt, or entered into an agreement with creditors?										
IF YOU HAVE ANSWERED YE	ES TO ANY	OF TH	IE ABOV	E, PLE	ASE PF	OVIDE DET	TAILS BEL	ow	'	
CLAIMS HISTORY: Please lis	t below de	tails of	all claim	ns/inci	dents t	hat have oc	curred in	the last 5	years	
Date of Incident	С	Description Cost					Outst	Outstanding or Settled		
		£								
				£	E					

## Please complete appropriate to the event/activity

1. Game Shoots						
Private Syndicate or Commercial						
Annual Turnover (if applicable)	£					
Maximum Number of Shoots per Season						
Maximum Number of Guns per Event						
How long has the Shoot been in existence?						
If you require insurance against abandonment please request the Abandonment Proposal Form						



2. Fishing Clubs (excluding Sea Fishing)					
Commercial or Non-Profit Club?	0				
Annual Turnover (if applicable)  Number of Members (Non-Profit Clubs)	£				
Number of Boats (Max. Length 10 Metres)					
Number of Boats (Max. Length 10 Metres)					
3. Pest Control					
Annual Turnover: (if applicable)	£				
Do you use Guns & Traps?	Yes		No		
Do you use Poisons & Flame Guns?	Yes		No		
Maximum number of Operatives					
4. Gamekeepers					
Annual Turnover: (if applicable)	£				
Maximum Number of Gun Days					
5. Rough Shoot or Pigeon Shoot					
Annual Turnover: (if applicable)	£				
Full Description of Activity					
Maximum Number of Shoots per year					
Maximum Number of Guns per shoot					
6. Deer Stalking					
Annual Turnover: (if applicable)	£				
Maximum Number of Stalkers					
Maximum Number of Guests per Stalker					
Maximum Number of Guests per Stalker  7. Goose Guides					
	£				
7. Goose Guides	£				
7. Goose Guides Annual Turnover (if applicable)	£				
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity	£				
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives	£				
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives  8. Conservation Trusts	£				
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives  8. Conservation Trusts  Annual Turnover	£		No		
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives  8. Conservation Trusts  Annual Turnover  Number of Hectares  Number of Hectares	Yes rossbow or Live S	_		Ranges)	
7. Goose Guides Annual Turnover (if applicable) Full Description of Activity Maximum number of Operatives  8. Conservation Trusts Annual Turnover Number of Hectares Number of Hectares  9. Clay Pigeon Shooting/Instructors; Archery, Air Rifle, Co	Yes rossbow or Live S	_		Ranges)	
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives  8. Conservation Trusts  Annual Turnover  Number of Hectares  Number of Hectares  9. Clay Pigeon Shooting/Instructors; Archery, Air Rifle, Compared to the compar	Yes rossbow or Live S	_		Ranges)	
7. Goose Guides  Annual Turnover (if applicable)  Full Description of Activity  Maximum number of Operatives  8. Conservation Trusts  Annual Turnover  Number of Hectares  Number of Hectares  9. Clay Pigeon Shooting/Instructors; Archery, Air Rifle, Clay Fixed Commercial Rangers. Excludes event	Yes  Possbow or Live S  Es at Country Fairs, F	_		Ranges)	



10. Hawking & Falconry Working &/or Display Events							
Annual Turnover (if applicable)	£						
Description of Activity	Б						
Number of Members (Non-Profit Clubs)							
11. Gun Dog Training							
Annual Turnover	£						
Description of Activities							
12. Wildfowling							
Annual Turnover	£						
Number of Members							
Description of Activities							
13. Other Discipline / Activity							
Please specify giving full description							
Annual Turnover: (if applicable)	£						
Number of Members: (Non-Profit Clubs)							
Maximum Number of Operatives							
Maximum Number of Guns per Event							
ECTION A: EMPLOYERS LIABILITY (optional) Limit of Inde	arring =	<i>L</i> 10,00	0,000				
Number of Employees				,			
Annual Wage Roll							
Annual Wage Roll Employers Reference Number (ERN)	Yes				No		
Number of Employees  Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt:	Yes				No		
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt:  (eg. No payroll, Casual employees, Below Threshold etc)	Yes				No		
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt: (eg. No payroll, Casual employees, Below Threshold etc) (eg. No payroll, Casual employees, Below Threshold etc)	Yes				No		
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt: (eg. No payroll, Casual employees, Below Threshold etc) (eg. No payroll, Casual employees, Below Threshold etc)	Yes £1m		£2m		No £5m		£10m
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt: (eg. No payroll, Casual employees, Below Threshold etc) (eg. No payroll, Casual employees, Below Threshold etc)  ECTION B: PUBLIC LIABILITY  Limit of Indemnity: (tick as appropriate)			£2m				£10m
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?  If 'Yes' please state reason ERN Exempt: (eg. No payroll, Casual employees, Below Threshold etc) (eg. No payroll, Casual employees, Below Threshold etc)  ECTION B: PUBLIC LIABILITY  Limit of Indemnity: (tick as appropriate)  If a Club, please state number of members			£2m				£10m
Annual Wage Roll  Employers Reference Number (ERN)  Are you ERN Exempt?	£1m		£2m				£10m



#### SECTION C: PROPERTY DAMAGE (Optional)

Description	Sum Insured	Description			Sum Insured
Rearing Houses & Release Pens					
Bird Rearing Equipment					
Clay Pigeon Traps & Equipment					
Birds					
Steel/Shipping Containers					
Tools & Portable Machinery, Lawnmowers etc					
If you have included 'Clay Pigeon Traps o	& Equipment' please	complete the fo	ollowing:		
State the full address of where the equipincluding postcode	oment is kept				
What is the equipment kept in? (eg. Steel Container, Barn, Private House, etc)					
In respect of Steel Containers do they he	ave the following sec	curity in place:			
Locking Bars and 2 Mortise Closed Shac such as Chubb IK21 or IK11 or Ingersol CS		Yes		No	
Padlock Shroud to protect the above padlocks?		Yes		No	
Is anyone in sight of the Steel Container		Yes		No	
State any other security in place (eg. Alarm, Security Guards, Locked gates etc	c)				'

### SECTION D: PERSONAL ACCIDENT (Optional) - Employees & Members

Employees: Capital Benefits range from £5,000 to £30,000 in sets of £5,000							
Capital Sum Insured							
Estimated Annual Wage Roll							
Temporary Total Disablement:	(weekly benefit)	per week					
Members: Capital Benefits range from £5,000 to £30,000 in sets of £5,000  Temporary Total Disablement (weekly benefit) is automitically included at 1% of the Capital Sum Insured							
Capital Sum Insured:							
PROPOSER'S CONSENT CLAUSE DATA PROTECTION ACT 1998							
I/We herby consent to any information you masy have about me/us being processed by you for the purposes of providing insurance and claims handling, which may necessitate your providing such information to third parties.  I/We declare that to the best of my knowledge and belief all the particulars on this proposal either completed by me or on my behalf are true and complete and I have taken reasonable steps to ensure their accuracy.							
Signature	Date						
<b>NOTICE TO PROPOSER</b> The parties are free to chose the law applicable to this Insurance Contract. Unless specifically agreed to the contrary this insurance shall be subject to English Law.							

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